

Work Order ID 123853

August-28-14 10:04:20 AM

\*123853\*

Page 1

Item ID: D3875-1L08

Accept

\*N900040100\*

Setup Start \*NS1\*

Revision ID:

Stop \*NS2\*

Item Name: Floor Protector, Passenger (Clear)

Start Date: 8/28/14 Start Qty: 25.00

\*25\*

Cust Item ID:

Required Date: 8/28/14 Req'd Qty: 25.00

\*25\*

Customer:

Reference:

Approvals: Process Plan: MLJ

Date: 14-08-28 Tooling:

Date:

Run Start \*NR1\*

QC:

Date: SPC (Y/N):

Date:

Stop \*NR2\*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
D3875	C

100 0.00

\*100\*

HandThermo

Memo

0.00

Hand Finishing Thermoforming

1-Cut Sheet to required Blank size

27  
DAS  
27  
9-89  
14/9/10

105 0.00

\*105\*

HandThermo

Dry Material

Memo

0.00

Hand Finishing Thermoforming

Dry Sheet as per QSI022 POLYCARBONATE

Temp: 245 de

Time IN: 5:00 PM

Time OUT: 6:00 AM

SEP 08 2014

Per.....

DAS  
27  
9-89  
14/9/10

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width:100%; border: none;"> <tr> <td style="width:25%;">Skid-tube <input type="checkbox"/></td> <td style="width:25%;">Crosstube <input type="checkbox"/></td> <td style="width:25%;">Water Jet <input type="checkbox"/></td> <td style="width:25%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
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Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
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Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence  <input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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# Work Order ID 123853

\*123853\*

Page 2

Item ID: D3875-1L08

Accept

\*N900040100\*

Setup Start \*NS1\*

Revision ID:

Stop \*NS2\*

Item Name: Floor Protector, Passenger (Clear)

Start Date: 8/28/14 Start Qty: 25.00

\*25\*

Cust Item ID:

Required Date: 8/28/14 Req'd Qty: 25.00

\*25\*

Customer:

Reference:

Approvals: Process Plan: Date: Tooling: Date:

Run Start \*NR1\*

QC: Date: SPC (Y/N): Date:

Stop \*NR2\*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
110		0.00							
<b>*110*</b>									
Thermoform	<b>Memo</b>	0.00							
Thermoforming Machine	1-Machine Set-Up 2-Pre-heat Tool to required temp. 3-Thermoform as per Dwg and Folio #FTA0xxusing tool DT9435 Dwg Rev: <u>C</u> Folio Rev: <u>B</u>  Visually inspect for proper formation and texture								
140		0.00							
<b>*140*</b>									
HandThermo	<b>Memo</b>	0.00							
Hand Finishing Thermoforming	1-Trim to finished dimensions as per Dwg								
150	QC2- Inspect parts off machine FAI/FAIB	0.00							
<b>*150*</b>									
QC	<b>Memo</b>	0.00							
Quality Control	Complete FAI document								

27  
DAS  
27  
9-89  
4/9/10

810

DAS  
07  
9-89  
14/09/10

810

DAS  
07  
9-89  
14/09/10

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td style="width: 33%;">           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </td> <td style="width: 33%;">           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </td> <td style="width: 33%;">           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </td> <td style="width: 33%;">           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </td> </tr> </table>	Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>
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Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
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Training									
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Unapproved									

### FAULT CATEGORY

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**\*123853\***

Page 3

\*N900040100\*

Setup Start \*NS1\*

Stop \*NS2\*

\*25\*

Cust Item ID:

\*25\*

**Customer:**

**Reference:**

Run Start \*NR1\*

**Tooling:**

Date:

Stop \*NR2\*

SPC (Y/N):

Date:

Insp.  
Stamp

0.00

\*160\*

QC

## Memo

0.00

### Quality Control

170

Identify as per dwg & Stock Location:

0.00

\*170\*

### Packaging

## Memo

0.00

### Packaging

180

QC21- Final Inspection - Work Order Release

0.00

\*180\*

QC

## Memo

0.00

## Quality Control

20

DAS  
38  
9-89

14-5-18

17/2/18 W A

MLG 14-09-19

~~14-a-1a~~



DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

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# Picklist Print

August-28-14 10:04:25 AM

Page 1

Work Order ID: 123853

\*123853\*

Parent Item: D3875-1L08

\*D3875-1L 08\*

Parent Item Name: Floor Protector, Passenger (Clear)

Start Date: 8/28/14

Required Date: 8/28/14

Start Qty: 25.00

Required Qty: 25.00

Comments: lpp Rev. C Added Color to D3875-1 14/07/02 DL

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
MLEXS.118-90318-08		Purchased	No			100	sf	2,726.508	9.84	116			

\*MI FXS 118-90318-08\*

Lexan Sheet

\*\*

Location

Loc Qty

Loc Code

therm

2726.508

113127

8

m126994

2718.508

360 sf

SJP  
14/9/10

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

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Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

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DART AEROSPACE LTD		Work Order: 123853
Description: Floor Protector		Part Number: D3875-1
Inspection Dwg: D3875	Rev: <u>8C</u>	Page 1 of 1

**FIRST ARTICLE INSPECTION CHECKLIST**  
**THERMOFORMING SECTION**

Description	Accept	Reject	Method of Inspection	Comments
Inside Radii less than <u>N/A</u> "				
Shape Definition	✓			
Texture Retention	✓			
Material imperfections such as bumps, cracks, voids, scratching	✓			

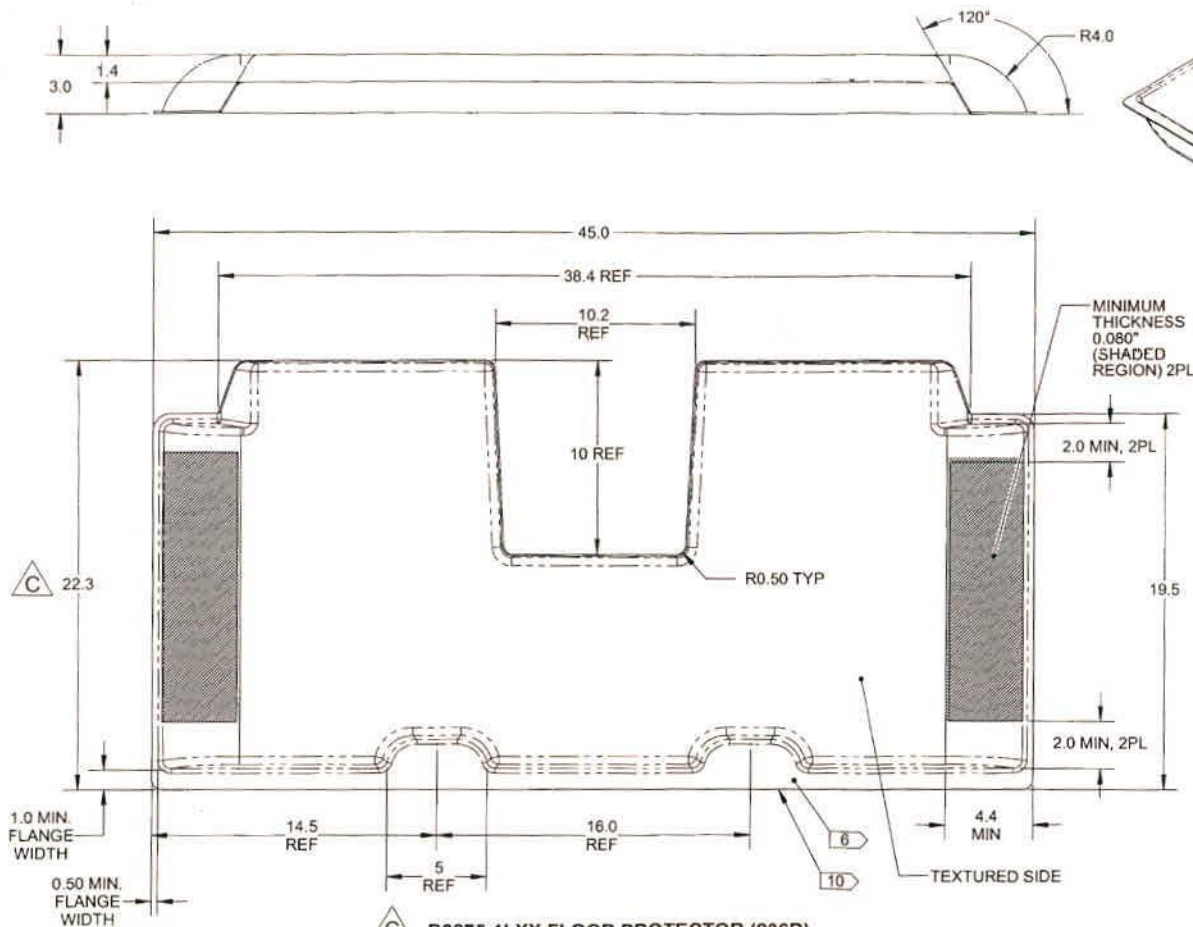
Measured by: <u>DAS 07 9-89</u>	Date: <u>14/09/10</u>
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**TRIMMING SECTION**

Drawing Dimension	Tolerance	Actual Dimension	Accept	Reject	Method of Inspection	Comments
0.050	Min	<u>0.058"</u>	✓			
0.080	Min	<u>0.087"</u>	✓			
45.0	+/-0.100	<u>45.1"</u>	✓			
<u>22.3</u> <del>21.6</del>	+/-0.100	<u>22.3"</u>	✓			
1.4	+/-0.100	<u>1.42"</u>	✓			

Measured by: <u>DAS 07 38 9-89</u>	Date: <u>14-9-19</u>
Audited by: <u>9-89</u>	Date: <u>14-9-19</u>
Preliminary Approval: <u> </u>	Date: <u> </u>

Rev	Date	Change	Revised by	Approved
A	09.09.15	New Issue	KJ	
B	13.05.08	Dimensions updated per Dwg Rev B	KJ	
C	14.03.31	Dimension revised	KJ	<u>AA</u>



**D3875-1LXX FLOOR PROTECTOR (206B)**

**NOTES:**

- 1) MATERIAL: SEE TABLE
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: IDENTIFY WITH DART P/N "D3875-1LXX" PER DART QSI 044 METHOD 6.4
- 7) WEIGHT: 3.81 lbs
- 8) TOOLING: THERMOFORM PER MOLD DT9475 PER QSI 022. TRIM PER MOLD.
- 9) MINIMUM MATERIAL THICKNESS AFTER FORMING IS 0.050" EXCEPT WHERE SHOWN
- 10) EDGE FLANGE MAY BE TRIMMED FOR FIT BY CUSTOMER, AS REQUIRED.

**C**

PART NUMBER	DESCRIPTION
D3875-1L02	F6006 SUEDE/POLISHED 701 BLACK LEXAN SHEET 0.125 THICK (REF DART SPEC MLEX.125-F6006-02)
D3875-1L08	90318 PROTECT-A-GLAZE 112 CLEAR LEXAN SHEET 0.118 THICK (REF DART SPEC MLEX.118-90318-08)

APPROVED

C	ADDED D3875-1L02 CONFIGURATION AND RE-IDENTIFIED D3875 AS D3875-1L08. REVISED NOTE 1 AND ADDED MATERIAL TABLE. REVISED PART DIMENSION 21.6 TO 22.3 (ZN B8-1).		AK	14.04.10
B	19.5 WAS 18.6 MIN (ZN B3-1). 45.0 WAS 45.2 (ZN D6-1). 1.1 MIN. WAS 0.5 MIN. (ZN B8-1).		DB	13.04.09
A	NEW ISSUE		PH	09.01.29
REV.	DESCRIPTION		BY	DATE
DESIGN	AK	<b>DART AEROSPACE LTD</b> HAWKESBURY, ONTARIO, CANADA		
DRAWN	RF			
CHECKED	VS	DRAWING NO.	REV. C	
MFG. APPR.	DL	D3875	SHEET 1 OF 1	
APPROVED	HS	TITLE	SCALE	
DE APPR.	D3	FLOOR PROTECTOR	NTS	
DATE	14.04.10			

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SHOP COPY  
RETURN TO  
ENGINEERING  
UNCONTROLLED COPY  
SUBJECT TO AMENDMENT  
WITHOUT NOTICE  
WORK ORDER

NO. 123853 M45  
14-08-28

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